Express Mail No. EV 452 773 222 US

PART B - FEE(S) TRANSMITTAL

9-17.04

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

#

or <u>Fax</u> (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications....

indicated unless corrected maintenance fee notification		in Block 1, by (a) specify	ring a new c	orrespondence add	lress; and/or (b) indicating a sep	parate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying		
		IPE		Fee(s) Transmittal papers. Each addi	I. This certificate cannot be used itional paper, such as an assignn	I for any other accompanying
20583 7.	590 08/09/2004	/011 6 3	2	have its own certif	tional paper, such as an assignn ficate of mailing or transmission	
JONES DAY		/	<u>:}</u> }		Certificate of Mailing or Tran	asmission
222 EAST 41ST S	T	4 0 0004	(e)	I hereby certify the	nat this Fee(s) Transmittal is being	ng deposited with the United
, NEW YORK, NY	10017	SEP 1 6 2004	I hereby certify that this Fee(s) Transmittal is being deposited with States Postal Service with sufficient postage for first class mail in addressed to the Mail Stop ISSUE FEE address above, or bein transmitted to the USPTO (703) 746-4000, on the date indicated by			s above, or being facsimile
9/20/2004 SDIRETA2 000	000039 503013 09910	950	<i>E</i>]	transmitted to the	USP10 (703) 746-4000, on the	(Depositor's name)
I FC:1501 1330.00 DA		To a series	7			(Signature)
2° F C: 1504 300.(TOAN-AMB				(Date)
APPLICATION NO.	FILING DATE	FIRST NA	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/910,950	09/910,950 07/23/2001		Shripad S. Bhagwat		10624-047-999	3712
TITLE OF INVENTION: IN	NDAZOLE DERIVATIVES	AS JNK INHIBITORS AN	D COMPOS	ITIONS AND ME	THODS RELATED THERETO	
APPLN, TYPE	APPLN, TYPE SMALL ENTITY		PU	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	XXX1,33	0	\$300	XXX 1,63	30 11/09/2004
5 EXAMINER		ART UNIT	CI	ASS-SUBCLASS		
STOCKTON, LAURA		1626		514-403000		
1. Change of correspondence address or indication of "Fe CFR 1.363).		• • • • • • • • • • • • • • • • • • •		OONID	DAY	
☐ Change of corresponde	ence address (or Change of C	Correspondence (1) the	e names of units OR, alter	np to 3 registered pratively,	patent attorneys	
Address form PTO/SB/12 "Fee Address" indicati PTO/SB/47; Rev 03-02 Number is required.	on (or "Fee Address" Indicat or more recent) attached. Use	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			names of up to	
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON THE PAT	ENT (print o	r type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee data will of this form is NOT a substit	appear on th tute for filing	ne patent. If an as g an assignment.	ssignee is identified below, the	document has been filed for
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
SIGNAL 1	PHARMACEUTICA	ALS, INC.	SAN	DIEGO,	CALIFORNIA	
Please check the appropriate	assignee category or categor	ries (will not be printed on the	he patent);	individual	acorporation or other private g	roup entity
4a. The following fee(s) are	enclosed:	4b. Payment	t of Fee(s):			
Assue Fee			ck in the amo	ount of the fee(s) is	s enclosed.	
Publication Fee (No sm	nall entity discount permitted) 🖸 Payme		card. Form PTO-20		
XAdvance Order - # of 6	Copies10	The D Deposit A	Director is he Account Nur	reby authorized by nber 50-30	charge the required fee(s), or (enclose an extra c	credit any overpayment, to copy of this form).
5. Change in Entity Status	(from status indicated above))				
a. Applicant claims SM	IALL ENTITY status. See 37	/ CFR 1.27. 🚨 b. App	olicant is not	claiming SMALL	ENTITY status. See, e.g., 37 CF	R 1.27(g)(2).
		-			ously paid issue fee to the applic	
interest as shown by the reco	rds of the United States Pate	nt and Trademark Office.			registered attorney or agent; or t	ne assignee or other party in
(Authorized Signature) ant	hong 14. Inagra, Rg. No ? Insogna Reg.	5,203 (Date) By: Mu	child). 1º	mbor 16	ህ•.	
					by the public which is to file (an	nd by the LISPTO to process)
an application. Confidentialismus submitting the completed ap this form and/or-suggestions	ty is governed by 35 U.S.C. plication form to the USPTC for reducing this burden, should be 22313-1450. DO NOT S	122 and 37 CFR 1.14. This D. Time will vary depending ould be sent to the Chief In	collection is g upon the in formation Of	s estimated to take ndividual case. An fficer, U.S. Patent	12 minutes to complete, includi y comments on the amount of ti and Trademark Office, U.S. Der ESS. SEND TO: Commissioner	ng gathering, preparing, and ime you require to complete partment of Commerce, P.O.
Under the Paperwork Reduct	ion Act of 1995, no persons	are required to respond to a	collection of	information unles	s it displays a valid OMB contro	l number.

TRANSMIT THIS FORM WITH FEE(S)